TEE DETERMINATION RECORD

Application or Docket Number

	Eff)	O Docke	Number			
*	Effective October 1, 2000 CLAIMS AS FILED - PART I						HII
, *	TOTAL CLAIMS	(Column 1)	(Column 2)	SMALL TYPE	ENTITY	OR SMA	HER THAN LL ENTITY
	FOR	NUMBER FILED		RATE	FEE	RAT	
	TOTAL CHARGEABLE CLAIMS	C/2	NUMBER EXTRA	BASICF	EE (OR BASIC	0 0-0-
	INDEPENDENT CLAIMS	/ / minus 20=	0	X\$ 9=			
	MULTIPLE DEPENDENT CLAIM	minus 3 =	·			OR X\$18	=
		П	X40=	-	OR X80	= .	
	* If the difference in column 1 is	io and an analysis	+135=		OR +270-		
	CLAIMS AS	amended - Part	o in column 2	TOTAL	7	OR TOTAL	
	Column 1)	(Column		- Ongo.			RTHAN
•	REMAINING	HIGHES NUMBE	31			R SMAL	LENINY
	AFTER AMENDMENT	PREVIOUS PAID FO	SLY EYTDA	RATE	ADDI- TIONAL	RATE	ADDI-
.	ON Total .	Minus	=	┨ ╟───┤	FEE	TATE	TIONAL FEE
	andependent .	Minus ***		X\$ 9=		R X\$18=	
	FIRST PRESENTATION OF MU	LTIPLE DEPENDENT CL	AIM .	X40=		X80=	
			<u></u>	+135=			
				TOTAL	OF	707	
	(Column 1)	(Column 2	(Column 3)	ADDIT. FEE	OF	ADDIT. FEE	
11 17	1 - 361_9 A0 CAP CAP AN - 9 CLACK 1-34	HIGHEST NUMBER	DDFOF		ADDI-		·
	Total	PREVIOUSLY PAID FOR	EXTRA	RATE TI	ONAL	RATE	ADDI- TIONAL
Aggrana	Independent o Mi	inus	=	1 1	FEE		FEE
W.	FIRST PRESENTATION OF	nus ooo	=	X\$ 9=	OR	X\$18=	
	FIRST PRESENTATION OF MULTI	IPLE DEPENDENT CLAI	W D	X40=	OR	X80=	
				+135=	OR	+270=	
_ ,	/ 0-1			TOTAL ADDIT. FEE		TOTAL	
O	(Column 1)	(Column 2)	(Cclumin 3)	ADDIT. FEE		DDIT. FEE	
AMENDMENT	REMAINING AFTER	HIGHEST NUMBER	PRESENT	AD		γ	
S	Total AMENDMENT	PREVIOUSLY PAID FOR	EXTRA	RATE TIO	VAL		ADDI- IONAL
MER	Independent		=	- FE	<u>:</u>		FEE
<u>\$</u>		8 000	=	X\$ 9=	OR	X\$18=	
	FIRST PRESENTATION OF MULTIPL			X40=	OR	X80=	
of the entry in column 1 is less than the entry in column 2, write "o" in column 3. With the entry in column 1 is less than the entry in column 2, write "o" in column 3. OR +135= OR +270=							
The Trighest Number Previously Paid For IN This space is less than 3, enter 20." The Trighest Number Previously Paid For IN This space is less than 3, enter 20." ADDIT. FEE OR +270= TOTAL ADDIT. FEE OR ADDIT. FEE ADDIT. FEE							
ADDIT. FEE							
M PTO-875							